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59							
60	AUTHORITY: Implementing and authorized by the Community Services Act [405 ILCS 30]						
61	and Section 15.3 of the Mental Health and Developmental Disabilities Administrative Act [20						
62	ILCS 1705].	-					
63							
64	SOURCE: E	Emergency rules adopted at 16 Ill. Reg. 211, effective December 31, 1991, for a					
65		f 150 days; new rules adopted at 16 Ill. Reg. 9006, effective May 29, 1992; amended					
66	at 18 Ill. Reg. 15593, effective October 5, 1994; emergency amendment at 19 Ill. Reg. 9200,						
67		y 1, 1995, for a maximum of 150 days; amended at 19 Ill. Reg. 16178, effective					
68	November 28, 1995; amended at 21 Ill. Reg. 8292, effective June 25, 1997; recodified from the						
69	Department of Mental Health and Developmental Disabilities to the Department of Human						
70	Services at 21 Ill. Reg. 9321; amended at 22 Ill. Reg. 21870, effective December 1, 1998;						
71	emergency amendment at 23 Ill. Reg. 4497, effective April 1, 1999, for a maximum of 150 days;						
72	amended at 23 Ill. Reg. 10205, effective August 23, 1999; amended at 24 Ill. Reg. 17737,						
73	effective November 27, 2000; amended at 26 Ill. Reg. 13213, effective August 20, 2002;						
74	amended at 28 Ill. Reg. 11723, effective August 1, 2004; amended at 31 Ill. Reg. 9097, effective						
75	July 1, 2007; emergency amendments at 31 Ill. Reg. 10159, effective July 1, 2007, for a						
76	maximum of 150 days; amended at 31 III. Reg. 15805, effective November 8, 2007; amended at						
77 70	32 Ill. Reg. 9981, effective July 1, 2008; emergency amendment at 35 Ill. Reg. 1128, effective						
78 70	January 1, 2011, for a maximum of 150 days; emergency amendment repealed by emergency						
79	rulemaking at 35 Ill. Reg. 7719, effective April 28, 2011; amended at 35 Ill. Reg. 8860, effective						
80	May 26, 2011; amended at 36 Ill. Reg. 18582, effective December 13, 2012; amended at 38 Ill.						
81	Reg. 15550, effective July 1, 2014; amended at 39 Ill. Reg. 13684, effective October 1, 2015;						
82							
82	former Part r	repealed at 43 Ill. Reg. 1046, and new Part adopted at 43 Ill. Reg. 1049, effective					
83 84	former Part r January 1, 20						

SUBPART A: GENERAL PROVISIONS

86

<u>a)</u>	For t	For the purposes of this Section,				
	<u>1)</u>	"Entity" means any entity certified as a Certified Specialty Provider (CSP) or Certified Comprehensive Community Mental Health Center (CMHC) under this Rule.				
	<u>2)</u>	"Staff" or "staff person" means any person who:				
		is employed by, volunteers for, interns for, may be an unpaid personnel, or other individual who are agents of the CSP or CMHC, or individuals who are contracted to provide services for a Certified Specialty Provider (CSP) or Certified Comprehensive Community Mental Health Center (CMHC), or is employed by an entity that is contracted to provide services to an entity;				
		B) is in close contact (fewer than 6 feet) with other persons in the entity for more than 15 minutes at least once a week on a regular basis as determined by the entity. The term "staff" or "staff person" does not include any person who is present at the entity for				
		only a short period of time and whose moments of close physical proximity to others on site are fleeting (e.g., contractors making deliveries to a site where they remain physically distanced from others or briefly entering a site to pick up a shipment).				
	<u>3)</u>	"COVID-19 vaccine" means a vaccine for COVID-19 that has been authorized for emergency use, licensed, or otherwise approved by the U.S. Food and Drug Administration (FDA)				
	<u>4)</u>	An individual is "fully vaccinated against COVID-19" two weeks after receiving the second dose in a two-dose series of a COVID-19 vaccine authorized for emergency use, licensed, or otherwise approved by the FDA, or two weeks after receiving a single-dose COVID-19 vaccine authorized for emergency use, licensed, or otherwise approved by the FDA.				
<u>b)</u>		entity shall require all staff to be fully vaccinated against COVID-19 or be d in a manner consistent with the requirements of Subsection (c).				
	<u>1)</u>	Each entity shall require staff who are not fully vaccinated against COVID-19 to have, at a minimum, the first dose of a two-dose vaccination				

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130			series or a single-dose vaccination by September 19, 2021, and be fully
131			vaccinated against COVID-19 within 30 days following administration of
132			their first dose in a two-dose vaccination series.
133			
134		<u>2)</u>	Each entity shall require staff who are fully vaccinated against COVID-19
135		=7	to submit proof of full vaccination against COVID-19. Proof of
136			vaccination may be met by providing to the entity one of the following: (i)
137			a Centers for Disease Control and Prevention (CDC) COVID-19
138			vaccination record card or photo of the card; (ii) documentation of
139			vaccination from a health care provider or electronic health record; or (iii)
140			state immunization records.
140 141			state minumzation records.
142		2)	Each antity shall make available apportunities for staff to be fully
		<u>3)</u>	Each entity shall make available opportunities for staff to be fully
143			vaccinated against COVID-19, either directly at the entity or indirectly,
144			such as through an arrangement with a pharmacy partner, local health
145			department, or other appropriate health entity.
146		45	
147		<u>4)</u>	Each entity shall exempt individual staff members from the requirement
148			that all staff be fully vaccinated against COVID-19 if (i) vaccination is
149			medically contraindicated, including any individual staff member who is
150			entitled to an accommodation under the Americans with Disabilities Act
151			or any other law appliable to a disability-related reasonable
152			accommodation; or (ii) vaccination would require the individual staff
153			member to violate or forgo a sincerely held religious belief, practice, or
154			observance. Staff that fall within the exemption of this Subsection shall
155			undergo the testing requirements set forth in Subsection (c).
156			
157		<u>5)</u>	Entities may adopt more stringent policies requiring all staff to be
158			vaccinated. Nothing in this Section supersedes or modifies the date such
159			policies are designated by the entity to take effect.
160			
161	c)	Begin	nning by September 19, 2021, each entity shall require its staff who are not
162			vaccinated against COVID-19 to undergo testing for COVID-19, weekly, at
163			nimum. If staff who are not fully vaccinated against COVID-19 are not
164			d as required by this Subsection, the staff shall not be permitted to enter or
165			at the entity.
166		WOIR	the office.
167		<u>1)</u>	The COVID-19 test must either have Emergency Use Authorization by the
168		<u> </u>	FDA or is being operated pursuant to the Laboratory Developed Test
169			requirements by the U.S. Centers for Medicare and Medicaid Services.
170			requirements by the 0.5. Centers for Medicare and Medicard Services.
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171 172		<u>2)</u>	Such testing must be conducted on-site at the entity or the entity must obtain proof or confirmation from the staff person of the negative test				
173 174			result obtained elsewhere.				
174 175		<u>3)</u>	Each entity shall make COVID-19 tests available to its staff consistent				
176		<u>3)</u>	with the requirements of this Section, or consistent with any more				
177			stringent requirements for testing adopted by the entity.				
178			biningone requirements for testing adopted by the entity.				
179		<u>4)</u>	If a staff person tests positive for COVID-19, the entity shall exclude the				
180			staff person from the entity and the staff person shall be subject to all				
181			applicable isolation and quarantine rules and entity policies.				
182							
183		<u>5)</u>	Staff who are not fully vaccinated may be permitted to enter or work at the				
184			entity while they are waiting to receive the results of their weekly test.				
185							
186	<u>d)</u>	Each e	entity shall post conspicuous signage throughout the entity, including at				
187		_	of entry and exit and each hallway, notifying staff that the entity makes				
188			ble opportunities for staff to be fully vaccinated against COVID-19. The				
189			shall be on 8.5 by 11-inch white paper, with text in Calibri (body) font and				
190		<u>26-poi</u>	nt type in black letters.				
191							
192	<u>e)</u>	Each entity shall provide its staff educational materials on the benefits and					
193		potent	ial risks associated with the COVID-19 vaccine.				
194	0	D 1					
195	<u>f)</u>	Each e	entity shall maintain a record of the following:				
196 107		1)	W/1-1				
197		<u>1)</u>	Weekly census of staff;				
198 199		2)	Weakly cancus of staff who are fully vaccinated against COVID 10:				
200		<u>2)</u>	Weekly census of staff who are fully vaccinated against COVID-19;				
200		<u>3)</u>	Weekly census of staff who are not fully vaccinated against COVID-19;				
202		<u>3)</u>	weekly census of staff who are not fully vaccinated against CO viD-17,				
203		<u>4)</u>	Weekly census of staff who not fully vaccinated for COVID-19 and are				
204		<u>.17</u>	tested for COVID-19 (regardless where testing occurred), including the				
205			number of individuals who test positive; and				
206							
207		5)	Verification that all staff have been provided education on the benefits and				
208			potential risks associated with the COVID-19 vaccine.				
209							
210	<u>g)</u>	Nothin	ng in this Section prohibits any entity from implementing vaccination or				
211		testing	requirements for staff, residents, and visitors that exceed the requirements				
212		of this	Section.				
213							

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214 (Source: Added at 46 Ill. Reg. _____, effective _____)